

## Annual Hazardous Waste Report Workshop

### INTRODUCTIONS



Lee McNabb Sheryl Grimmer

## RCRA SUBTITLE C SITE IDENTIFICATION FORM



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Louisiana Department of Environmental Quality

#### RCRA SUBTITLE C SITE IDENTIFICATION FORM

Dator Rouge, LA 10021							
1. Reason for	Reason for Submittal:						
Submittal  MARK ALL BOX(ES)	☐ To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)						
THAT ACTES	□ To provide a Subsequent Notificati	□ To provide a Subsequent Notification (to update site identification information for this location)					
	☐ As a component of a First RCRA Hazardous Waste Part A Permit Application						
	□ As a component of a Revised RCR	A Hazardous Waste Part A Permit	Application (Amendment # )				
	▶□ As a component of the Hazardous Waste Report (if marked, see sub-bullet below)						
	□ Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, > 1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)						
2. Site EPA ID	EPA ID Number		•				
Number	l <u> </u>	<u> </u>					
3. Site Name	Name:						
4. Site Location	Street Address:						
	City, Town, or Village:		County:				
	State:	Country:	Zip Code:				
5. Site Land Type	Land Type: ☐ Private ☐ County ☐	□ District □ Federal □ Tribal □ I	Municipal □ State □ Other				
6. NAICS Code(s)	A. Must enter at least 5 digit codes   B.						
	<b>c</b> .	D. I_					
7. Site Mailing Address	Street or P. O. Box:						
Addiooo	City, Town, or Village:						
		III					

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			Page Layout	References	Mailings	Review	View	

4. Site Location	Street Address:					
	City, Town, or Village:			County:		
	State:	Country:		Zip Code:		
5. Site Land Type	Land Type: ☐ Private ☐ County	□ District □ Fede	ral □ Tribal □ N	Municipal □ State □ Other		
6. NAICS Code(s)	A. Must enter at least 5 digit codes B.					
	C.		D. I_			
7. Site Mailing Address	Street or P. O. Box:					
Addiess	City, Town, or Village:					
	State:	Country:		Zip Code:		
8. Site Contact Person	First Name:	First Name: MI: Last Name				
reison	Title:					
	Street or P. O. Box:					
	City, Town, or Village:					
	State:	Country:		Zip Code:		
	Email:					
	Phone Number:		Ext:	Fax:		
9. Legal Owner and Operator of the Site	A. Name of Site's Legal Owner:			Date Became Owner (mm/dd/yyyy):		
	Owner Type: □ Private □ County □ District □ Federal □ Tribal □ Municipal □ State □ Other					
	Street or P. O. Box:					
	City, Town, or Village:			Phone:		
	State:	Country:		Zip Code:		
	B. Name of Site's Operator:			Date Became Operator (mm/dd/yyyy):		
	Operator Type: □ Private □ Count	y □ District □ F	ederal 🗆 Tribal	□ Municipal □ State □ Other		

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10. Type of Regulated Wa	ste Activity (at your site) or all <u>current</u> activities (as of the date submitting	the form);	complete any addition boxes as instructed.
	vities; Complete all parts 1 - 7.		approval required prior to startup.
Y□N□ 1. Generator of F		YUNU	5. Transporter of Hazardous Waste If "Yes", mark all that apply.
If "Yes", mark	only one of the following - a, b, or c.		ii 100 ; iiiaii an anat appiyi
()	Generates, in any calendar month, 1,000 kg/mo 2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or		<ul><li>□ a. Transporter</li><li>□ b. Transfer Facility (at your site)</li></ul>
(; c a (;	accumulates at any time, more than 1 kg/mo 2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo 220 lbs./mo) of acute hazardous spill cleanup	YONO	<ol> <li>Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities.</li> </ol>
□ b. SQG: 1	naterial. 00 to 1,000 kg/mo (220 - 2,200 lbs./mo.)	Y□N□	7. Recycler of Hazardous Waste
⊟ c. CESQG: L	of non-acute hazardous waste; ess than 100 kg/mo (220 lbs./mo.) f non-acute hazardous waste	YONO	8. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply.
If "Yes" above, i	ndicate other generator activities.		a. Small Quantity On-site Burner     Exemption
Event and not	enerator (generate from a short-term or one time t from on-going processes). If "Yes" provide an the Comments Section		b. Smelting, Melting, and     Refining Furnace Exemption
Y □ N □ 3. United States	s Importer of Hazardous Waste	Y□N□	9. Underground Injection Control
Y □ N □ 4. Mixed Waste	(hazardous and radioactive) Generator	Y□N□	10. Receives Hazardous Waste from Off-site
B. Universal Waste Activit	ties; Complete all parts 1 - 2.	C. Used	Oil Activities; Complete all parts 1- 4.

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Off-Specification Used Oil to Off-Specification Used Oil Burner

Used Oil Meets the Specifications

□ b. Marketer Who First Claims the

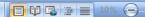
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 $Y \square N \square$ 

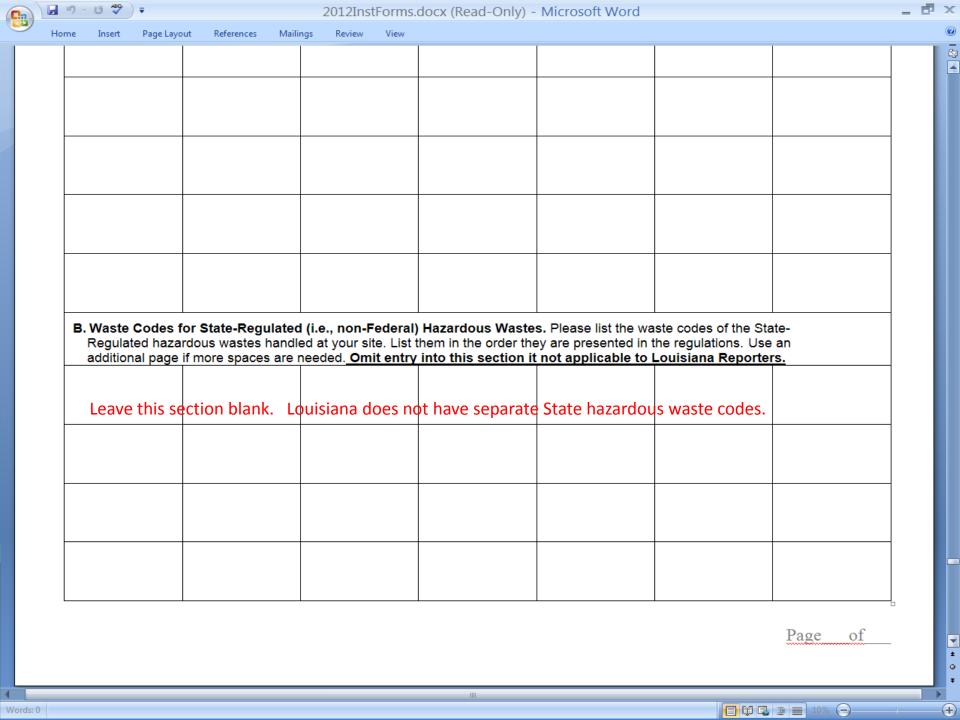
that apply:

Y □ N □ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.



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4. Certification. I certify under penalty of law that this document and all attachments were presupervision in accordance with a system designed to assure that qualified personnel properly gubmitted. Based on my inquiry of the person or persons who manage the system, or those pene information, the information submitted is, to the best of my knowledge and belief, true, accumere are significant penalties for submitting false information, including the possibility of fine are	り · じ 🍄 ) 🔻				20121113	troinis	.docx (Read-Only) - Microsoft Word	
pervision in accordance with a system designed to assure that qualified personnel properly gomitted. Based on my inquiry of the person or persons who manage the system, or those per sinformation, the information submitted is, to the best of my knowledge and belief, true, accurate are significant penalties for submitting false information, including the possibility of fine are	Insert	Page Layout	References	Mailings	Review	View		
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#### Short Term Generator Section 10.A.2

Mark "Yes" if the site is currently generating hazardous waste only as the result of a one-time, non-recurring, temporary event that is not related to normal production processes. Episodic generators have the potential to generate on a regular basis so they are not short term generators.

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	Hazardous Waste conly one of the following - a, b, or c.	Y□N□	5. Transporter of Hazardous Waste
	only one of the following - a, b, or c.		or manaporter of mazardous waste
1.00:			If "Yes", mark all that apply.
⊟ a. LQG:	Generates, in any calendar month, 1,000 kg/mo		⊟ a. Transporter
	(2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or		□ b. Transfer Facility (at your site)
	accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup	Y□N□	<ol> <li>Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities.</li> </ol>
	material.	$Y \square N \square$	7. Recycler of Hazardous Waste
	100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste;	Y□N□	8. Exempt Boiler and/or Industrial Furnace
	Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste		If "Yes", mark all that apply.
If "Yes" above,	indicate other generator activities.		<ul> <li>a. Small Quantity On-site Burner Exemption</li> </ul>

B. Universal Waste Activities; Complete all parts 1 - 2.

 $Y \square N \square$  3. United States Importer of Hazardous Waste

 $Y \square N \square$  4. Mixed Waste (hazardous and radioactive) Generator

C. Used Oil Activities; Complete all parts 1-4.

 $Y \square N \square$  9. Underground Injection Control

Y □ N □ 10. Receives Hazardous Waste from Off-site

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## Treater, Storer, or Disposer of Hazardous Waste Section 10.A.6

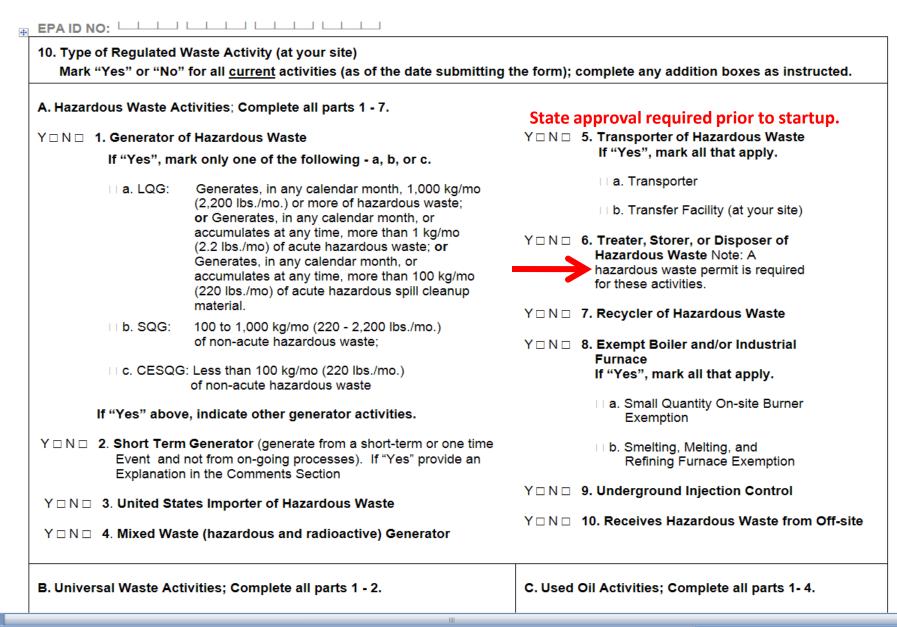
A note was added that reads "Note: A hazardous waste Part B permit is required for these activities."

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### Notification Form Contact



### Malcolm McNabb

## malcolm.mcnabb@la.gov

(225) 219-3244





NO CHANGES HAVE BEEN MADE TO THE 2012 ANNUAL HAZARDOUS WASTE REPORT INSTRUCTIONS AND FORMS



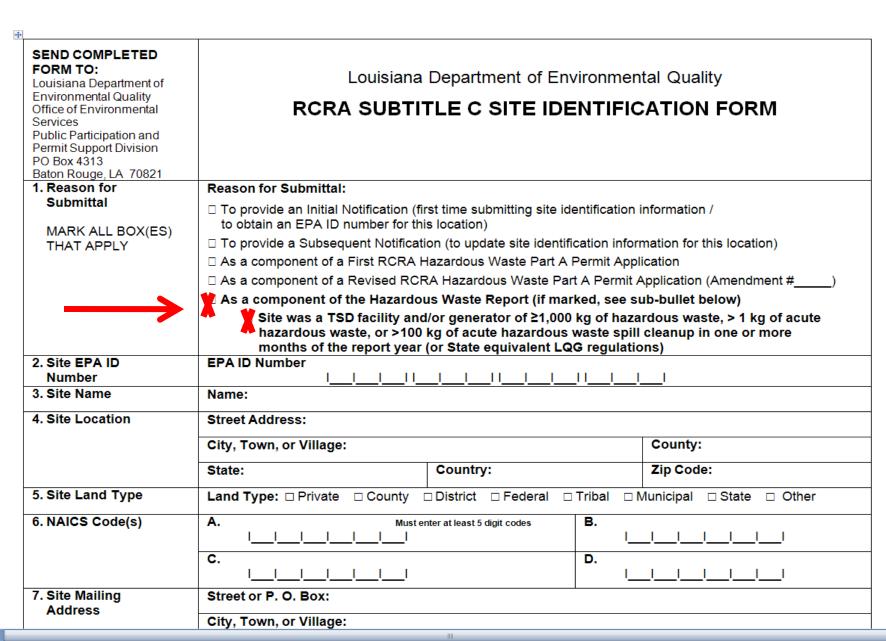


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	Waste Activity (at your site) o" for all <u>current</u> activities (as of the date submitting	g the form); complete any addition boxes as instructed	
A. Hazardous Waste	Activities; Complete all parts 1 - 7.	State approval required prior to startup.	
Y□N□ 1. Generator	of Hazardous Waste	Y □ N □ 5. Transporter of Hazardous Waste	
If "Yes", m	ark only one of the following - a, b, or c.	If "Yes", mark all that apply.	
⊟ a. LQG:	Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste;	a. Transporter	
Check the box	or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo	<ul><li>⊢ b. Transfer Facility (at your site)</li><li>Y □ N □ 6. Treater, Storer, or Disposer of</li></ul>	
that reflects	(2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup	Hazardous Waste Note: A hazardous waste permit is required for these activities.	
your current    b. SQG:	material. 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)	$Y \square N \square$ 7. Recycler of Hazardous Waste	
status.	of non-acute hazardous waste;	Y □ N □ 8. Exempt Boiler and/or Industrial Furnace	
II c. CESQ	G: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste	If "Yes", mark all that apply.	
If "Yes" abo	ve, indicate other generator activities.	<ul> <li>a. Small Quantity On-site Burner Exemption</li> </ul>	
Event and	m Generator (generate from a short-term or one time d not from on-going processes). If "Yes" provide an on in the Comments Section	□ b. Smelting, Melting, and Refining Furnace Exemption	
Y□N□ 3. United St	ates Importer of Hazardous Waste	Y□N□ 9. Underground Injection Control	
Y□N□ 4. Mixed Wa	aste (hazardous and radioactive) Generator	Y □ N □ 10. Receives Hazardous Waste from Off-s	ite
B. Universal Waste A	ctivities; Complete all parts 1 - 2.	C. Used Oil Activities; Complete all parts 1- 4.	

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# GENERATION AND MANAGEMENT FORM (GM FORM)

⊟ No (ŠKI	□ No (SKIP TO SEC. 3)				
ON-SITE PROCESS SY	STEM 1	ON-SITE PROCESS SY	STEM 2		
On-site Management Method code	Quantity treated, disposed, or recycled on site in 2012	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2012		
H	<u>шшш</u> . ш	H	шш. ш		

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OR ENTER:

Sec. 1

D. Source code

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Sec. 2

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# WASTE RECEIVED FROM OFF-SITE FORM (WR FORM)

C	3)		19 -	Ü	ABC	₹
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	BEFORE COPYING FORM, ATTACH SI OR ENTER: SITE NAME:		DEQ LOUISIANA	ENVIRONM	DEPARTMENT OF ENTAL QUALITY dous Waste Report	
	EPA ID NO:		WR FORM		E RECEIVED 1 OFF SITE	
•	Waste 1 A. Description of Hazardous Waste					
Ī	B. EPA hazardous waste code(s)	C. State hazardous waste code(s)	D. Off-site	e handler EPA ID nu	mber	
		<u>Leave this box blank</u>				
	E. Quantity received in 2012	F. UOM	G. Form c	ode	H. Management Method	
		Density └── . └── . ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	W		Code H	
	Waste 2 A. Description of Hazardous Waste					
	B. EPA hazardous waste code(s)	C. State hazardous waste code(s)	D. Off-site	e handler EPA ID nu	mber	
	E. Quantity received in 2012	F. UOM	G. Form c	ode	H. Management Method Code	

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# OFF-SITE IDENTIFICATION FORM (OI FORM)

Instructions: Please read the detailed instructions before completing this form.					
	A. EPA ID No. of off-site installation or transporter		B. Name of off-site installation or transporter		
Site 1					
☐ Gen	☐ Generator Street ☐ Transporter City		ff-site installation  J Zip L J J - L J J J - L J J J J J J J J J J		
	A. EPA ID No. of off-site installation or trans		B. Name of off-site installation or transporter		
Site 2					
C. Handle	r type (CHECKALL THAT APPLY) erator	D. Address of off-site installation Street			
☐ Tran		City			
☐ Receiving facility		State LL Zip LLLL-LLL			
	A. EPA ID No. of off-site installation or tran	sporter	B. Name of off-site installation or transporter		
Site 3	3				
☐ Gen	C. Handler type (CHECKALL THAT APPLY)  Generator  D. Address of of Street		ff-site installation		
☐ Rece	eiving facility				



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Insert

OR ENTER:

Site Name\_

EPA ID NO:

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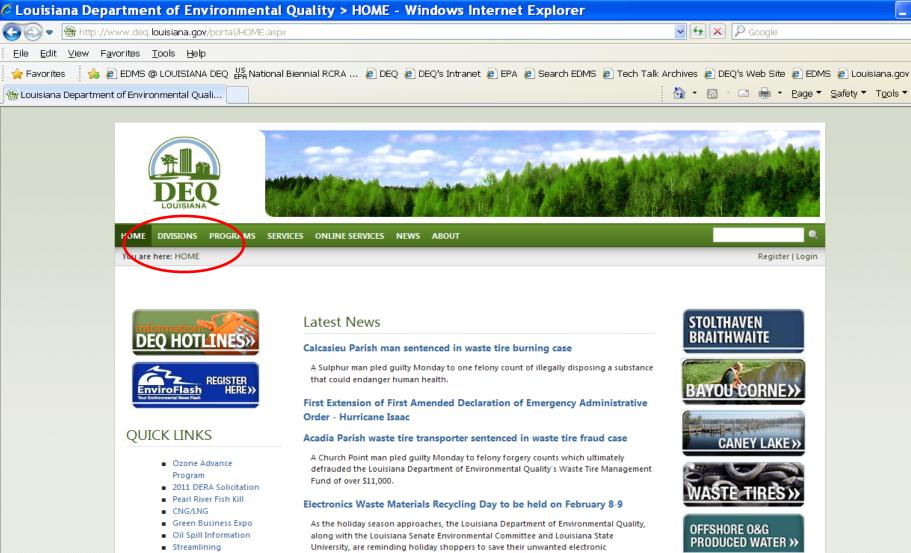
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## <u>Electronic Reporting</u> <u>Software</u>

The BRState software is available for use in submitting the 2012 Annual Hazardous Waste Report.



- Information
- Ozone & PM 2.5 Forecast
- DEQ Employee Directory
- Debris Site Interactive Map
- Subscribe to Enviro Flash Red-Tagged UST
- Facilities
- Asbestos and Lead
- FRIC Online!

components for recycling at the Electronics Waste Materials Recycling Day in February.

#### Oil company owner pleads guilty to illegal discharges in state waters

Today, Lobdell Percy Brown III, the owner and Chief Executive Officer of Mandeville-based T&F Oil Company, entered a plea of guilty as a result of the illegal discharge of pollutants into state waters.

#### **Discover DEQ - ENewsletter December 2012**

Contents - DEQ participates in radiation drills in Louisiana and Mississippi . Hurricane Isaac . Baton Rouge Clean Air Coalition promotes better air for Louisiana .DEQ Participates in Chem Friends event in Gonzales . DEQ On The Move . DEQ raises more ALLE 64 000 4--AL- 2012 H-:A--- 1M-... C-----:--

Submit Your Environmental Ideas & Suggestions



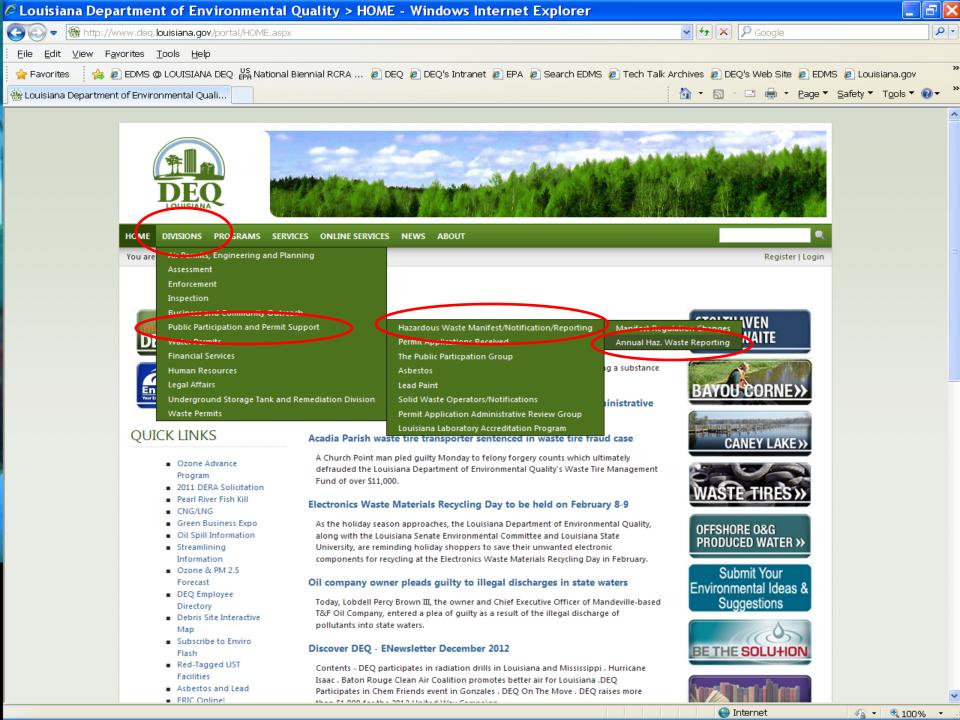


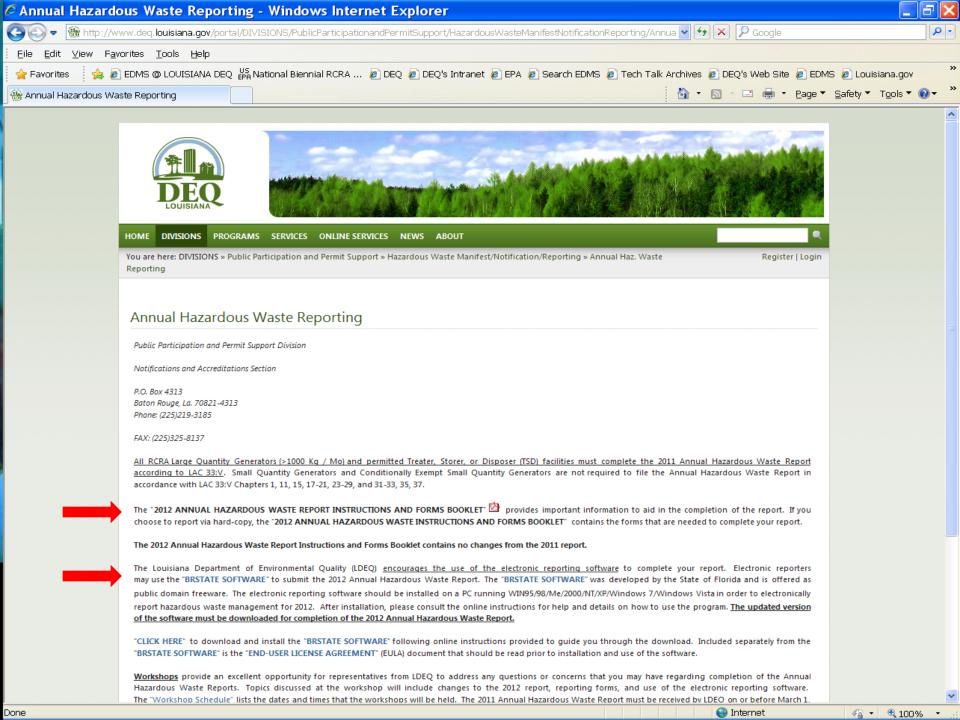
😜 Internet

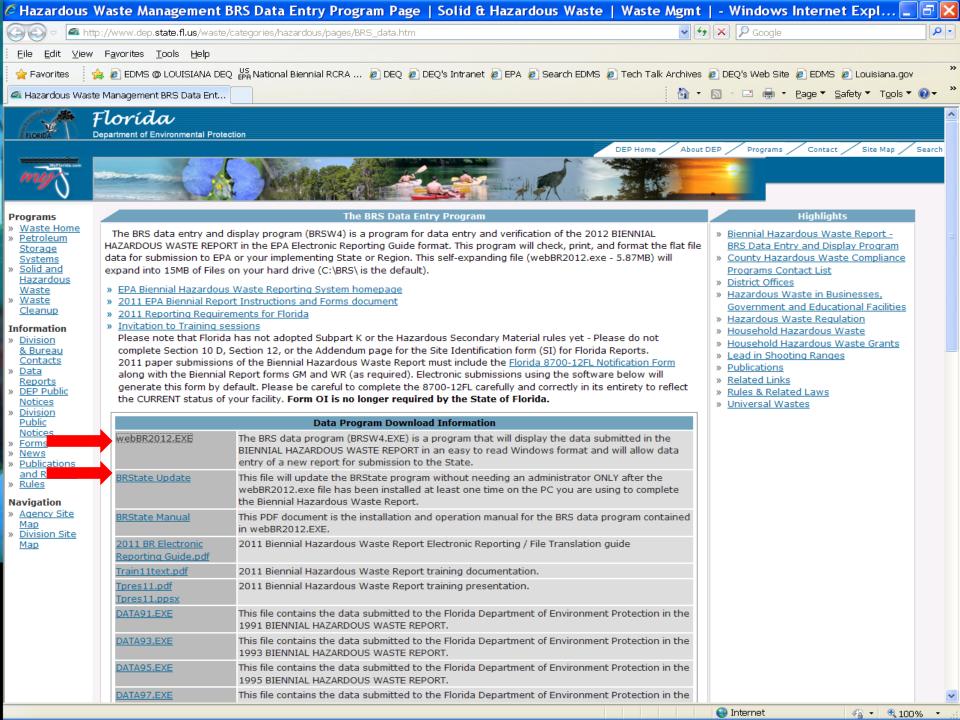










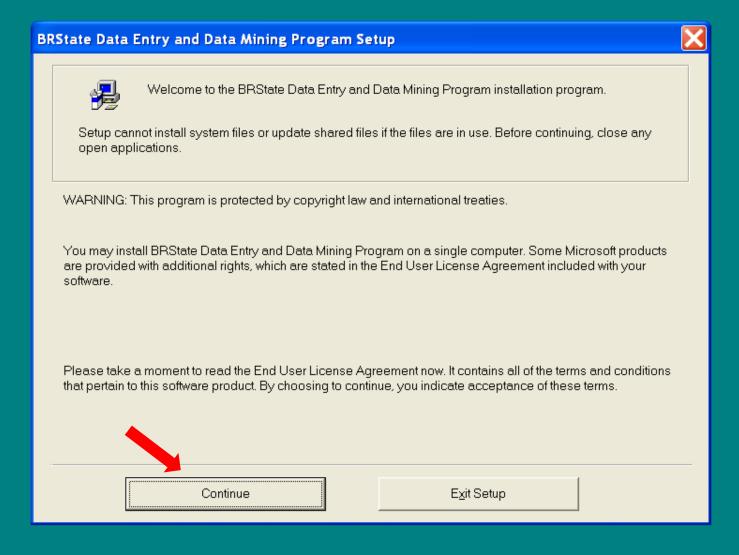








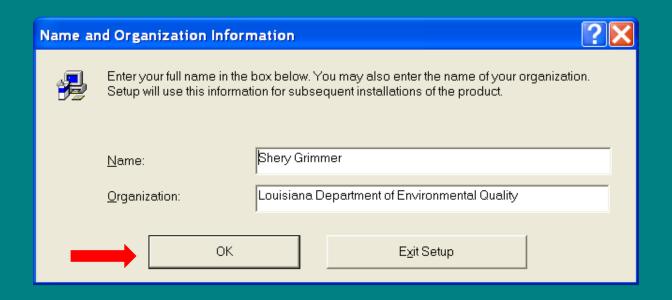
#### The End User License Agreement may be found on the LDEQ website at http://www.deq.louisiana.gov/portal/tabid/217/Default.aspx.





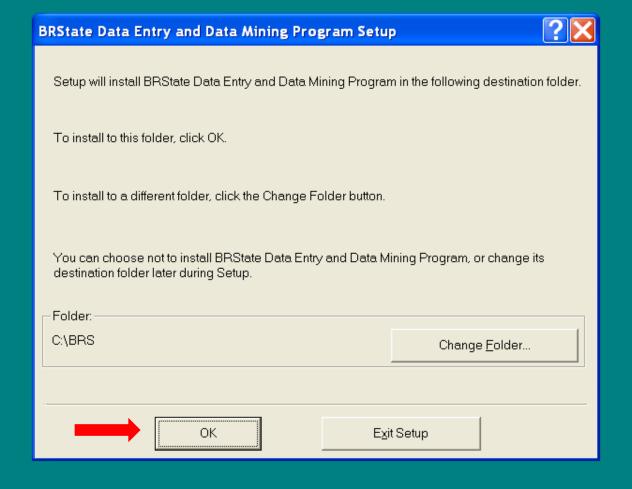








Errors will occur if BRState is installed into a folder that has any blanks in the file name. Use the Default destination folder for installation of this software to avoid errors.

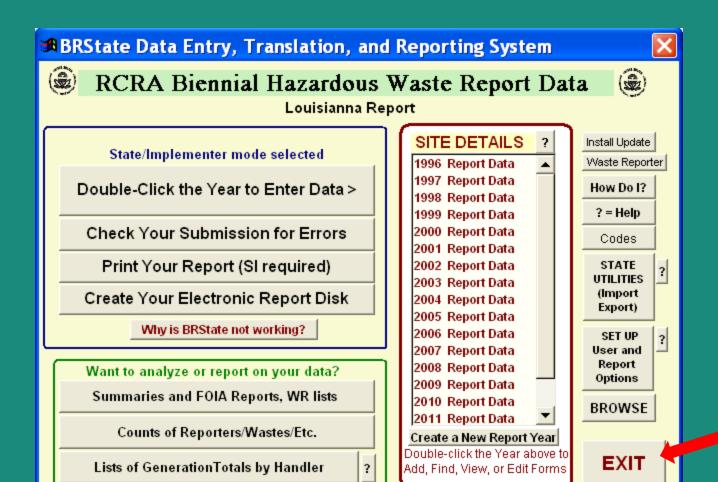






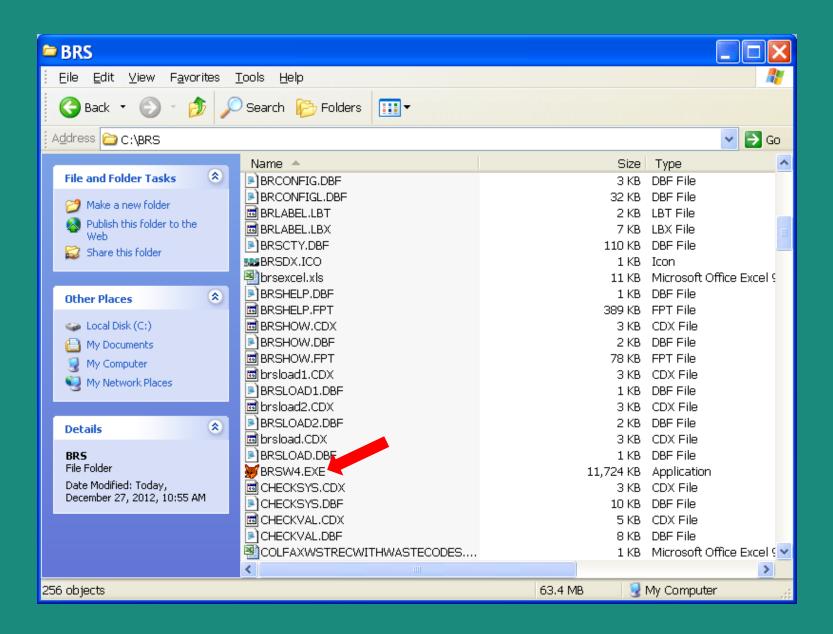


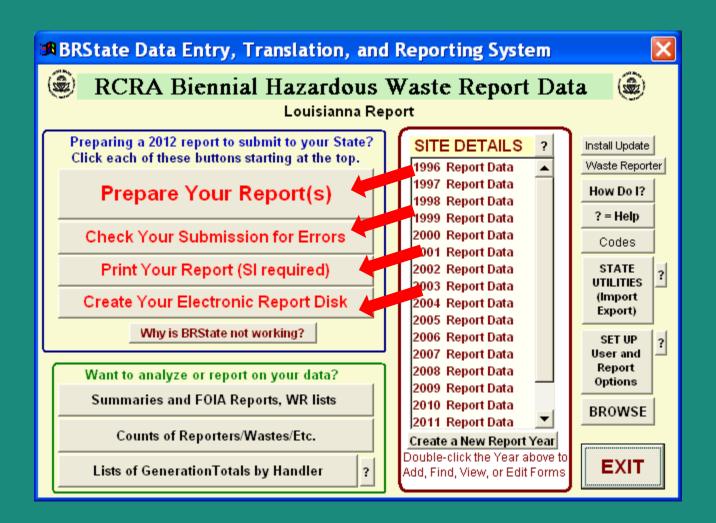




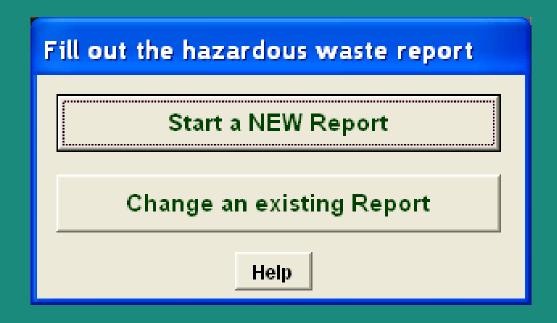








Use the red buttons on the left to complete your report.



### Enter or select the reporting site's EPA ID Number

To create a new report, enter the Site EPA ID Number below. To edit an existing report enter the Site EPA ID Number or choose the number from the list of existing reports.

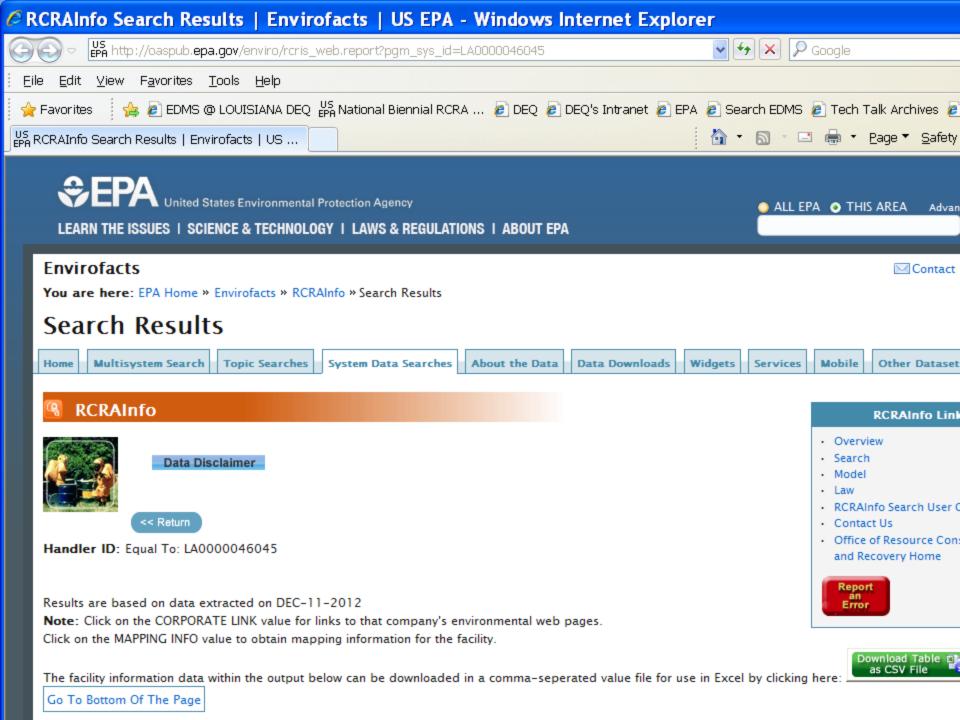
For a new report, enter the name of the site below. For an existing report, chose the ID and the name will be displayed to change if desired. Check the checkboxes below to indicate what you will be reporting later.

Fill in the forms as required, using the Next and Check boxes to proceed. The checkboxes below will determine which forms are displayed.

To pre-load a new report from last year's data (if available): Enter the Site EPA ID Number below:

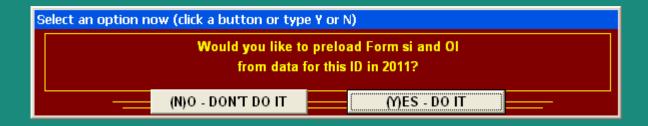
	For this report yea	nr: <b>2012</b> ▼ New
	Enter a new report Site EPA ID Number here:	
Enter the	reporting Site's Name:	
<u>Ir</u>	any one month of the report year, did this Site:	(check all that apply)
	☑ Generate more than 1000 kg (1kg acute) of RCRA Haza	nrdous Waste On-Site (Federal LQG)
	☑ Ship RCRA Hazardous Waste Off-Site to be Managed (	Usually by an off-site TSDR Facility)
	☐ Treat/Dispose/Recycle my generated RCRA Hazardous Wa	aste On-Site (May Require a PERMIT)
	Receive and handle RCRA Hazardous Waste from Off-Site	(Usually for Commercial TSDRs)
	Discard/Quit	Next ->





Enter or select the reporting site's EPA ID Number						
To create a new report, enter the Site EPA ID Number below. To edit an existing report enter the Site EPA ID Number or choose the number from the list of existing reports.						
For a new report, enter the name of the site below. For an existing report, chose the ID and the name will be displayed to change if desired. Check the checkboxes below to indicate what you will be reporting later.						
Fill in the forms as required, using the Next and Check boxes to proceed. The checkboxes below will determine which forms are displayed.						
To pre-load a new report from last year's data (if available): Enter the Site EPA ID Number below:						
For this report year: 2012 ▼ New						
Enter a new report Site EPA ID Number here: LAD000000001 Pre-Load the forms						
from a Previous Report						
Enter the reporting Site's Name:						
In any one month of the report year, did this Site: (check all that apply)						
✓ Generate more than 1000 kg (1kg acute) of RCRA Hazardous Waste On-Site (Federal LQG)						
✓ Ship RCRA Hazardous Waste Off-Site to be Managed (Usually by an off-site TSDR Facility)						
☐ Treat/Dispose/Recycle my generated RCRA Hazardous Waste On-Site (May Require a PERMIT)						
Receive and handle RCRA Hazardous Waste from Off-Site (Usually for Commercial TSDRs)						
Discard/Quit Next ->						

Forms may be pre-loaded from the previous year's report. Once the forms have been pre-loaded, the data should be reviewed and updated to reflect the current years information.



#### Enter or select the reporting site's EPA ID Number

To create a new report, enter the Site EPA ID Number below. To edit an existing report enter the Site EPA ID Number or choose the number from the list of existing reports.

For a new report, enter the name of the site below. For an existing report, chose the ID and the name will be displayed to change if desired. Check the checkboxes below to indicate what you will be reporting later.

Fill in the forms as required, using the Next and Check boxes to proceed. The checkboxes below will determine which forms are displayed.

To pre-load a new report from last year's data (if available): Enter the Site EPA ID Number below:

For this report year: 2012 ▼ New   Enter a new report Site EPA ID Number here: LAD000000001						
Enter the reporting Site's Name: MY REPORT						
In any one month of the report year, did this Site: (check all that apply)						
☑ Generate more than 1000 kg (1kg acute) of RCRA Hazardous Waste On-Site (Federal LQG)						
✓ Ship RCRA Hazardous Waste Off-Site to be Managed (Usually by an off-site TSDR Facility)						
☐ Treat/Dispose/Recycle my generated RCRA Hazardous Waste On-Site (May Require a PERMIT)						
Receive and handle RCRA Hazardous Waste from Off-Site (Usually for Commercial TSDRs)						
Discard/Quit Next ->						

## Hazardous Waste Report for





Enter all required forms for your Site

Enter the SI form to describe and identify your Site (required)

Enter GM forms to describe the Generation, Shipment, and/or Management of hazardous waste at this site

Enter WR forms to describe the Receipt and Management by a TSDF of hazardous waste from an OFF-Site Generator

Enter OI forms to identify any Transporters you use or sites receiving waste from or sending waste to your site

Check This Site's Report for Questionable Data

Print This Report to paper (Form SI required)

Create Your Electronic Report Submission Disk

Save and Return

# Data Entry Form - Site IDentification and Generator Status for MY TEST

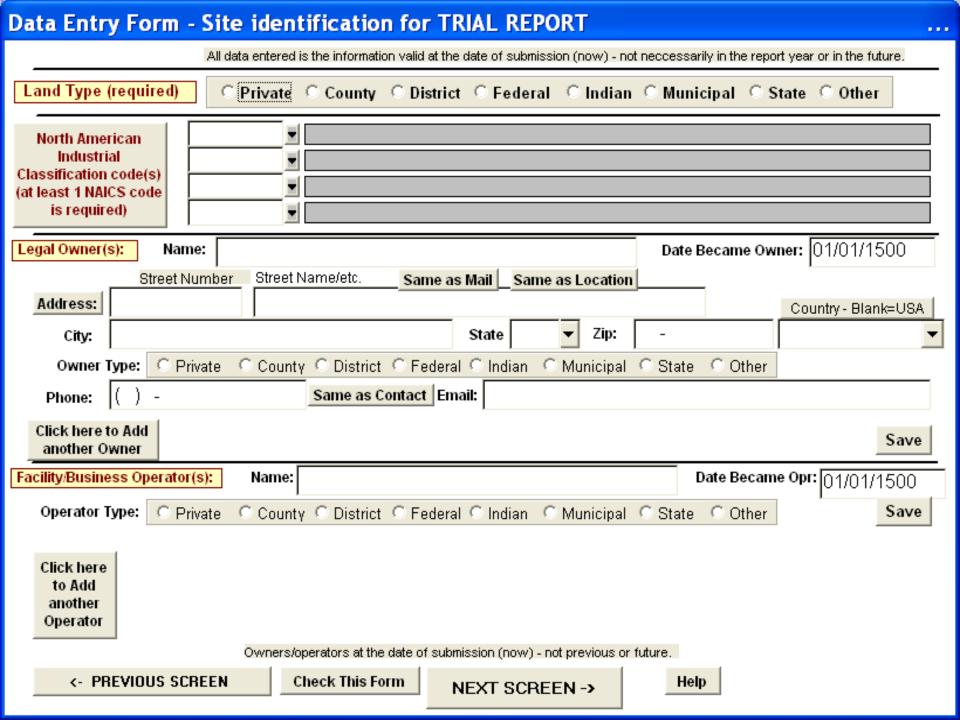
nter the reporting Site	's Name: MY TEST			
	bmitting This Hazardous Waste Repo juent Notification of Regulated Waste	_		
▼ To provide Subsection ▼	sequent Notification of Regulated Wa	ste Activity (required)		
✓ As a component	t of the Biennial RCRA Hazardous Wa	aste Report (old form 8	700-13)	
☐ This is a	Federal Required Report (this site wa	as a TSD or LQG in the	report year) 2012	
This i	s not a Federal Required Report Bec	ause EPA Biennial R	eport 🔻	
	Hazardous Waste Generator Status o reason for reporting, but your PRESE			
Federal RCRA Hazardous Waste Generator Status at the present time.  © Large Quantity Generator (>1000 kg/Month or > 1kg Acute/100kg acute cleanu © Small Quantity Generator (100 kg/Month - 1000 kg/Month) (< 1kg Acute) © Conditionally Exempt Small Quantity Generator (<100 kg/Month ) (< 1kg Acute) © Non-Generator (0 kg/Month)				
State Generator Stat	tus (if different from Federal)	▼		
☐ This site	has a permit as a Treater, Storer, or	Disposer of Hazardous	s Waste	
Check This Form SI	Undo Changes Delete This Site	NEXT SCREEN ->	Quick Help	

#### Data Entry Form - Site identification for TRIAL REPORT All data entered is the information valid at the date of submission (now) - not neccessarily in the report year or in the future. Type in the Physical Location Address Information for your site: (required) Street Number Street Name/ Building/ Directions/ etc. Address: City: State Zip: Number: County: Type in the Mailing Address of your site: ( required ) Street Number | Street Name/ P.O. Box/ Mail Station/ etc. P.O. Box/ Mail Station line 2 Address: City: State Zip: Country: Blank = USA Leave this BLANK for USA Type in the primary RCRA Contact name and information for your site: ( required ) First Name: Middle Init: Last Name: Title: Same as Mail Address: Same as Location State Zip: City: Country: Fax: Blank = USA Email: Ext: Phone:

<= PREVIOUS SCREEN Check This Form

NEXT SCREEN =>

Help



Data Entry Form - Site identification for	TRIAL REPORT					
The site status at the date of this report (8700-12) submission (now) - not previous or future.  Current Generator Status: CIOG(>1000) CSQG (100-1000) CESQG (<100) C 0 kg/month State Status: CYNN Transporter of Hazardous Waste  CYNN Transfer Facility  CYNN Treater, Storer, or Disposer of Hazardous Waste  CYNN Recycler of Hazardous Waste (at your site)  CYNN Mixed Waste (hazardous and radioactive) Generator  CYNN Short-Term Generator  State Specific Activities  TyNN Short-Term Generator Status: CyNN Specific Activities  State Specific Activities  State Specific Activities  State Specific Activities  State Specific Activities						
B. Universal Waste Activities (Total > 5000 KG) (Large Quantity Handler only)  Batteries Pesticides Mercury containing equipment Lamps ANTIFREEZE MERCURY-CONTAINING EQUIPMENT ELECTRONICS  Select above then click-> Destination Facility for Universal Waste	C. Used Oil Activities Notification Used Oil (UO) Transporter  Y N UOTransporter  Used Oil Processor and/or Re-refiner  Y N UO Processor  Y N UO Processor  Y N Off-Specification Used Oil Burner  Used Oil Fuel Marketer  Y N Marketer of Off-Specification Used Oil  Y N Marketer of On-Specification Used Oil					
Click Here to Enter EPA Waste Codes  Waste codes expected to be generated in the codes of the co	he future - not neccessarily the report year waste.  NEXT SCREEN ->  Help					

#### Waste Codes applicable to this waste stream EPA Waste Co DoubleClick below to add a Code Browse DoubleClick a Code for Details or to Change The Code K001 F020 IU001 D001 F001 F002 K002 F021 IU002 D002 lK003 D003 F003 F022 luoo3 F004 K004 F023 IU004 D004 F005 lK005 IU005 D005 F026 F006 K006 F027 lU006 D006 F007 lK007 P001 lU007 D007 D008 F008 K008 P002 luoo8 F009 K009 P003 luoo9 D009 F010 lK010 P004 U010 D010 F011 K011 P005 U011 D011 F012 K013 P006 U012 D012 F019 K014 P007 lU014 D013 U015 D014 F020 K015 P008 F021 P009 U016 K016 D015 F022 K017 P010 lU017 D016 F023 K018 P011 IU018 D017 F024 K019 P012 luo19 D018 F025 luo20 D019 K020 P013 F026 K021 P014 IU021 D020 F027 K022 P015 lU022 D021 lU023 F028 K023 P016 D022 F032 lK024 P017 U024 D023 D024 F034 lK025 P018 lU025 F035 K026 P020 U026 D025 F037 lK027 P021 lU027 D026 F038 lK028 P022 lU028 D027 F039 K029 P023 U029 D028 D029 LABP K030 P024 U030 DELETE ADD THIS K031 P026 U031 D030 SAVE Selected or SEARCH Type in a Code U032 K032 P027 D031 <D Key> Deletes **EXIT** & <Enter Key> U033 K033 P028 D032 the Selected Code Adds a Code U034 K034 P029 D033 < Esc Key > Saves & Exits JEOGA K035 P030 luoss

Data Entry Form - Site identification for	TRIAL REPO	DRT	
COMMENTS (optional) ( <enter> or <tab> key not allowed)</tab></enter>			
			_
			~
Certification. I certify under penalty of law that this document			•
or supervision in accordance with a system designed to assure to the information submitted. Based on my inquiry of the person or p			
responsible for gathering the information, the information submitted and complete. I am aware that there are significant penalties for	ted is, to the best o	f my knowledge and bel	lief, true, accuraté,
fine and imprisonment for knowing violations.	subilificing false in	onnation, including the	possibility of
Certified By: ( REQUIRED for re-notification or Biennial Report ) Signed (First, Last)	Title	Date	
Add a	Title	Date	_
Certifier			
Select a certifier above first then:	Certifier D	elete this Certifier	$\underline{M}$
Edit tills	o certifier D	elete tills certiller	
Report prepared by:		Preparer's Phone: (	) -
Preparer's E-Mail:			
Data Entered by:	Preparer	Data Entered Date:	/ /
Undo these Changes to this Form SI	Delete ALL F	orms and Data for This	Site
<- PREVIOUS SCREEN Print This Form	Save/NE	XT FORM ->	Help

### Certify this submission

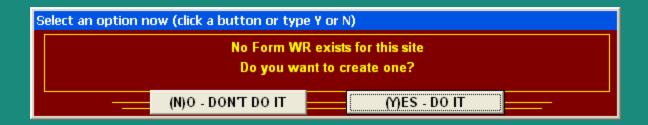


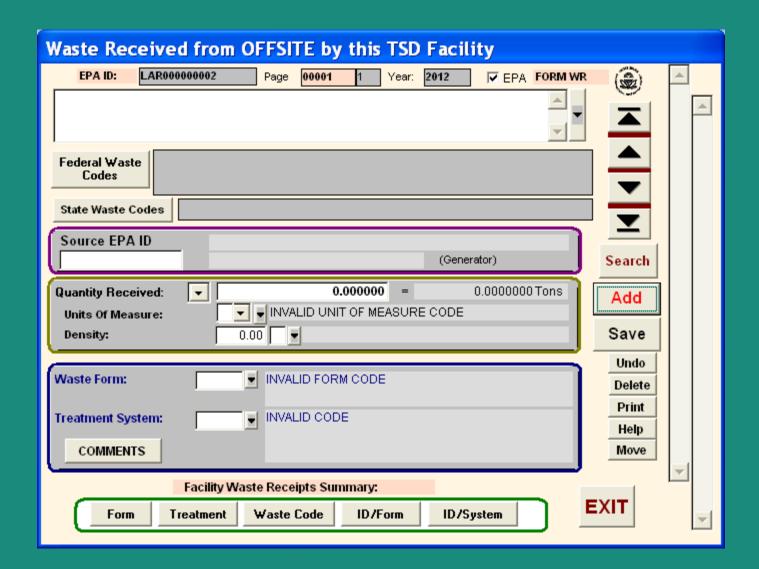
Certification I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Certified		(First,M.	.l.,Last)			
Signed:						
Title:						
Date: Mor	nth 10 Day	27 Year	2011	10/27/2011	v	
Discard Changes					Save Chang	es /Continue

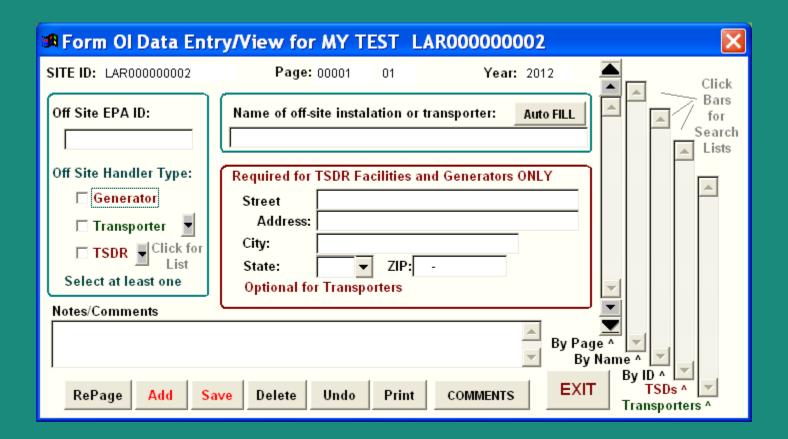
Data Entry Form - Site identification for ABL INDUSTRIES, LLC					
COMMENTS (optional) ( <enter> or <tab> key not allowed)</tab></enter>					
			_		
			$\overline{}$		
Certification. I certify under penalty of law that this document					
or supervision in accordance with a system designed to assure t the information submitted. Based on my inquiry of the person or	persons who i	manage the system, or those perso	ns directly		
responsible for gathering the information, the information submit and complete. I am aware that there are significant penalties for					
fine and imprisonment for knowing violations.	out in the same	oo mamaaan, maaaang ma pasaab	, 0.		
Certified By: ( REQUIRED for re-notification or Biennial Report ) Signed (First, Last)	Title	Date			
Add a SHERYL GRIMMER ES	Title	12/28/20	<u> </u>		
Certifier					
Select a certifier above first then:	0	Political de la Contraction	$\overline{}$		
Edit this	Certifier	Delete this Certifier			
Report prepared by:		Preparer's Phone: ( ) -			
Preparer's E-Mail:					
Data Entered by:	Preparer	Data Entered Date: / /			
Undo these Changes to this Form SI	Delete A	ALL Forms and Data for This Site			
<- PREVIOUS SCREEN Print This Form	Save	e/NEXT FORM -> Help			

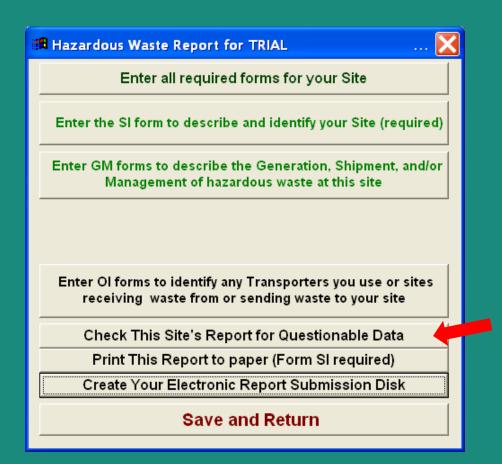
Generation an	d Manageme	nt [GM] For	ms - Crea	te a new for	m for each	waste stre
EPA ID: LAR000000	DO02 Pag	e: 00001 Ye	ar: 2012	EPA Required	form? FOR	M GM (♠)
Enter the Waste I	Description Here	Э				
To pre-load a ne	w form GM from I	ast year's data (it	f available)- C	lick: Add a Form	n(F3)	_
RCRA Hazardous Waste Codes						
						RePage Guide
Enter the Code that b	est Describes the S SOURCE CODE	ource of this Waste	e (click the grey	triangle box ▼ to s	Add	a Form(F3)
					Save C	Changes(F4)
Enter the Code that b	est Describes the P	hysical Properties	of this Waste			Delete Form
<b>▼</b> INVALID F	FORM CODE				Unc	lo(F5) Copy
How Much of This Wa	eta Wae Canaratadi	in 2042		w	/aste Minimization	Check
now mach of this wa		Init of Measure:	▼ Density		asto minimizacioni	<b>-</b>
0.00		ALID UNIT OF MEASUR	_	. C Spec. Grav.		711
Click Here to add	l/edit ONSITE Trea	atment/Disposal/	Recycling that	t occurred in 2012	!	
Click Here to add/	edit OFFSITE Shi	pments for Treat	ment/Disposal	/Recycling in 201	2	
						A
Comments Enter Co.	mments Here					Print(F2)
Linter Co	innelito i lele					Help(F1)
<- PREVIOUS FOR	M Add Form	NEXT FORM G	6M -> LA	AST GM / OTHER I	FORMS ->	EXIT(Esc)

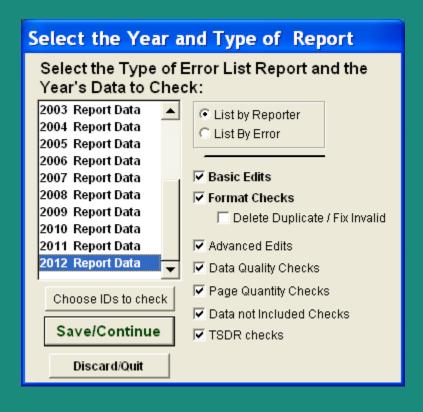












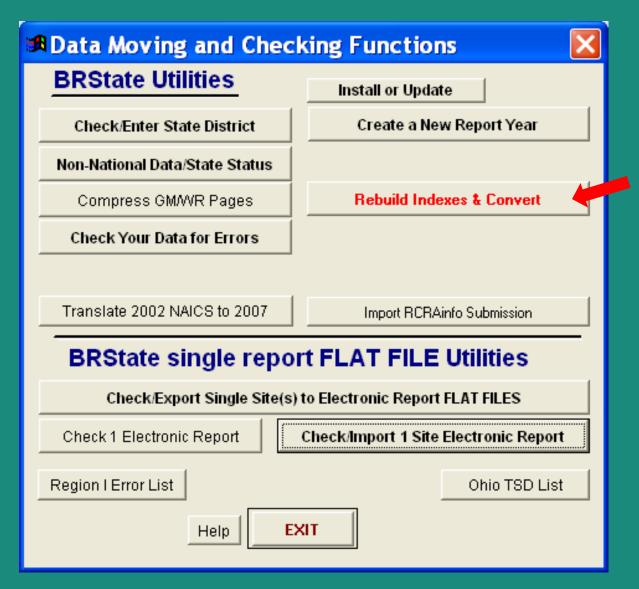


# **Edit Error Report**

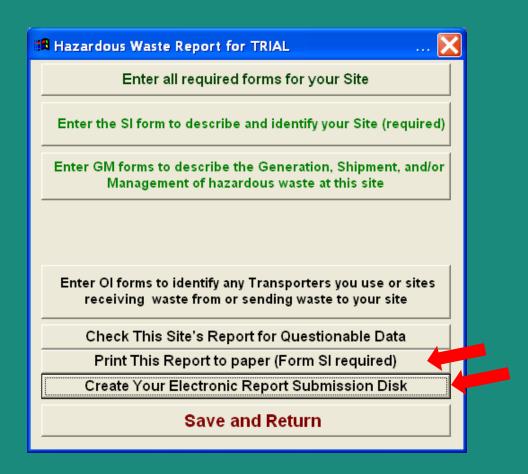
## Review the report and make needed corrections

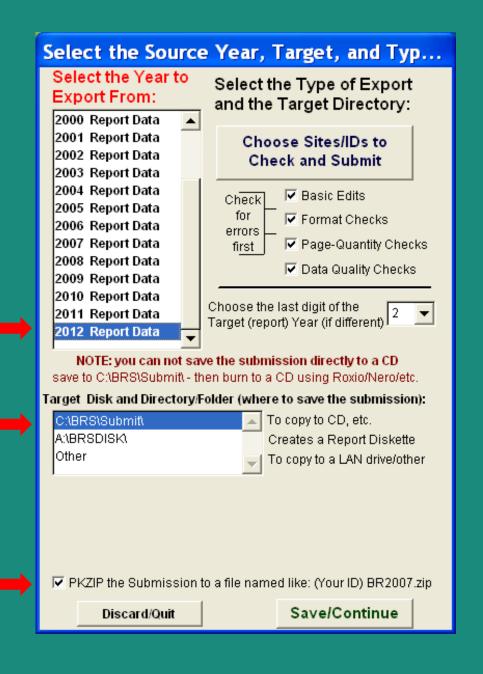
888	Data edit	error che	ecks fo	r C:\BRS\brs2012\		X
	Epa_id	Reporter	Err_page	Badcode	Err_type	_
Þ	LAR0000000002	MY TEST	00001	GM2 WCode: U009	GM waste CODE not in form SI waste code list - no longer generated?	
	LAR000000002	MY TEST	00001	Shipped to: LAD000777202	Did not report having H121 Treatment System in BRS(2009)	
	LAR000000002	MY TEST	00001	Shipped to: LAD000777202	This Facility did not submit a Biennial Report in 2009	
	LAR000000002	MY TEST	00001	Shipped To: LAD000777202	No form OI found for Offsite TSD- form GM	
	LAR000000002	MY TEST	OI	No transporter OI form:	No form OI found for Transporters -	
	LAR000000002	MY TEST	SI1	Reporter ID: LAR0000000002	EPA ID does not pass epa check digit routine	
	LAR000000002	MY TEST	SI1	Reporter ID: LAR0000000002	EPA ID was not found in last BRS report list	
	LAR000000002	MY TEST	SI1	LQG with < 10 tons:	LQG with less than 10 tons recurring on GM forms or TEMP ID number	
	LAR000000002	MY TEST	SI1	Generator Status: 1	SI Include = Y - Fed Generator status now = 1 - 1 KG annual generation?	
	LAR000000002	MY TEST	SI4	SI4 WCode: P005	Form SI Waste CODE not reported in any form GM-not generated in 2012?	
						$\nabla$
•					•	

#### BRState Data Entry, Translation, and Reporting System RCRA Biennial Hazardous Waste Report Data Louisianna Report Preparing a 2012 report to submit to your State? SITE DETAILS Install Update ? Click each of these buttons starting at the top. 1996 Report Data Waste Reporter 1997 Report Data Prepare Your Report(s) How Do I? 1998 Report Data ? = Help 1999 Report Data Check Your Submission for Errors 2000 Report Data Codes 2001 Report Data Print Your Report (SI required) STATE 2002 Report Data UTILITIES 2003 Report Data (Import Create Your Electronic Report Disk 2004 Report Data Export) 2005 Report Data Why is BRState not working? 2006 Report Data SET UP 2007 Report Data User and Report 2008 Report Data Want to analyze or report on your data? Options 2009 Report Data Summaries and FOIA Reports, WR lists 2010 Report Data BROWSE 2011 Report Data Counts of Reporters/Wastes/Etc. Create a New Report Year Double-click the Year above to **EXIT** Lists of GenerationTotals by Handler ? Add, Find, View, or Edit Forms

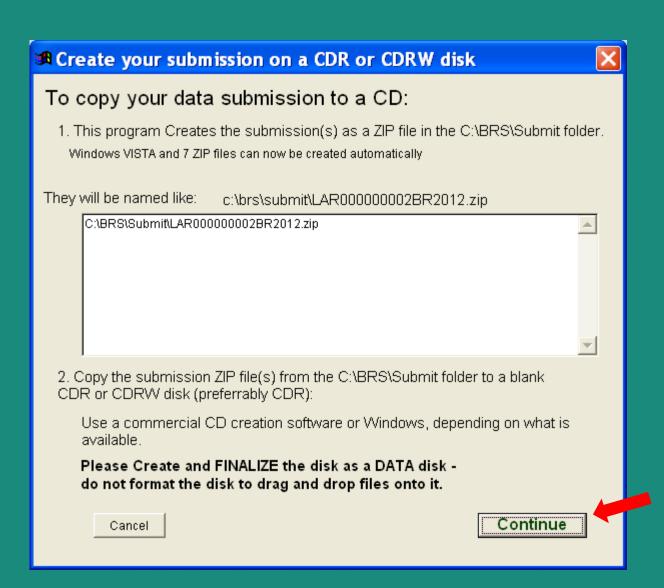


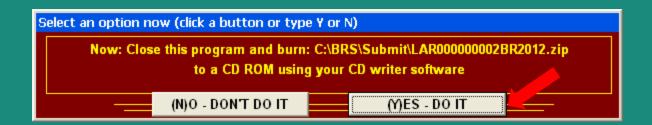
If "Rebuild Indexes & Convert" is shown in red, click on the box to rebuild the indexes.











### BRState Data Entry, Translation, and Reporting System





### RCRA Biennial Hazardous Waste Report Data



Louisianna Report

?

Preparing a 2011 report to submit to your State? Click each of these buttons starting at the top.

### Prepare Your Report(s)

Check Your Submission for Errors

Print Your Report (SI required)

Create Your Electronic Report Disk

Want to analyze or report on your data?

Summaries and FOIA Reports, WR lists

Counts of Reporters/Wastes/Etc.

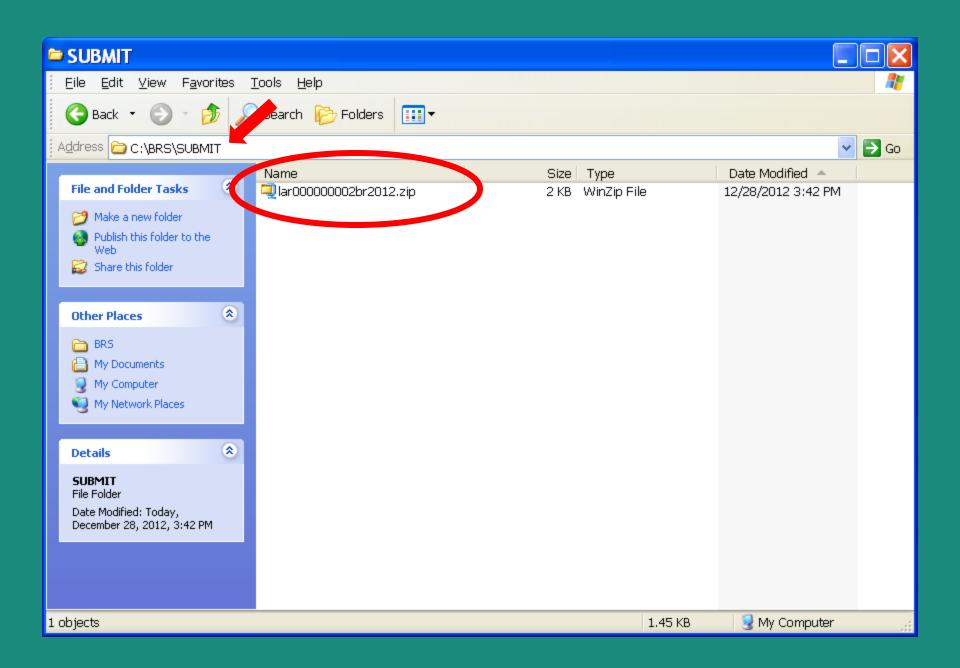
Lists of GenerationTotals by Handler



Add, Find, View, or Edit Forms



**EXIT** 





- > Reports are due at LDEQ on or before Friday, March 1, 2013.
- > Reports must be signed by the authorized representative of the facility.
- Electronic reports should be submitted on a CD or diskette and must be accompanied by the signed RCRA Subtitle C Site Identification Form.
- > Keep a copy of your report for your records copies should be kept for a minimum of 3 years from the due date of the report.